

## **EXHIBIT A-PROGRAM REQUIREMENTS (A-P): PRIMARY PREVENTION – OLDER ADULT**

### **I. Program Name**

Primary Prevention – Older Adult

### **II. Contracted Services**

Substance Use Disorder Primary Prevention Services

### **III. Program Information and Requirements**

#### **A. Program Goals**

Contractor shall provide services to accomplish the following goals:

- i. Reduce alcohol and/or drug use among older adults;
- ii. Promote positive and healthy lifestyles for older adults; and
- iii. Increase knowledge and awareness of tools and practices for optimal functioning.

Contractor shall provide services that contribute towards the accomplishment of the goals and objectives from the 2019- 2024 ACBH Strategic Plan for Alcohol and Other Drug Primary Prevention Services (ACBH Strategic Plan for AOD Primary Prevention Services).

#### **B. Target Population**

Contractor shall provide services to the following populations:

##### **1. Service Groups**

Contractor shall provide services to older adults who are at risk for substance use or abuse. Contractor shall make it a priority to serve individuals from diverse ethnic and cultural backgrounds corresponding with the diversity of the city or region of Alameda County in which the program is located.

##### **2. Referral Process to Program**

Contractor shall receive and generate referrals through community presentations and collaborative partnerships with other community-based organizations and gatekeeper groups, including paratransit, senior centers, senior housing communities, churches, meals on wheels, healthcare providers, social workers, etc. Contractor shall accept self-referrals and referrals from family members and/or other partners as identified above.

##### **3. Program Eligibility**

Contractor shall only serve individuals who:

- i. Are Alameda County residents;
- ii. Are the age of 60 and over; and
- iii. At risk for substance use or abuse, but who do not require substance abuse treatment.

Contractor shall serve individuals who fall within one or more of the following Institute of Medicine (IOM) Substance Abuse Prevention Intervention Categories:

- i. Universal: Targets the general population with messages and programs aimed at preventing or delaying the use and/or abuse of alcohol or other drugs. All members of the population share the same general risk for use and/or abuse, although the risk may vary among individuals.
- ii. Selective: Targets subsets of the population at risk for substance abuse by virtue of their membership in a particular population segment. Selective prevention targets the entire subgroup regardless of the degree of risk of any individual within the group.
- iii. Indicated: Targets individuals who do not meet Diagnostic and Statistical Manual of Mental Disorders, Fifth Edition (DSM-V) criteria for abuse or dependence, but who are showing early danger signs of substance abuse.

In all cases, these prevention services shall be directed at individuals who have never received nor required treatment services, and who are not expected to meet the criteria for a substance use disorder (SUD) according to the DSM-V.

#### **4. Limitations of Service**

Not applicable.

### **C. Program Description**

Contractor shall maintain programmatic services at or above the following minimum levels:

#### **1. Program Design**

Contractor shall conduct a variety of activities under the six prevention strategies as defined by the Center for Substance Abuse Prevention (CSAP):

- i. Information Dissemination
- ii. Education
- iii. Alternative
- iv. Problem Identification and Referral
- v. Community-Based Process
- vi. Environmental

Contractor's activities must clearly align to the efforts that directly contribute to the ACBH Strategic Plan for AOD Primary Prevention Services Plan, the IOM intervention categories, and the CSAP prevention strategies.

Contractor shall ensure that direct program staff are trained in understanding and effectively implementing CSAP strategies through participation in County/State-wide trainings, workshops, and webinars.

In coordination with ACBH, Contractor shall participate and coordinate annual evaluation activities, including but not limited to arranging focus groups, setting up key information interviews, and proctoring survey questionnaires with clients, their families, school administrators, and community members.

**2. Discharge Criteria and Process**

Not applicable.

**3. Hours of Operation**

Contractor shall maintain the hours as specified in Exhibit A-Scope of Work (SOW).

**4. Service Delivery Sites**

Contractor shall provide services in locations accessible for individuals participating in the services. These locations shall include senior living facilities, senior centers, community-based organizations, community centers, or in a client's home.

Contractor shall obtain written approval from ACBH through the ACBH Program Contract Manager prior to implementing any changes in service delivery sites.

**D. Minimum Staffing Qualifications**

Contractor shall maintain the direct service staffing as specified in the Exhibit A-SOW.

**IV. Contract Deliverables and Requirements**

**A. Process Objectives**

Contractor shall deliver services unique to their program as specified in Exhibit A-SOW that shall be separate and distinct from any other services/deliverables which may be purchased from Contractor through other sources of funding.

**B. Quality Objectives**

Contractor shall achieve the following quality objective:

Quality Measures	Quality Objectives
Number of meetings, trainings, and / or workshops sponsored or recommended by the ACBH Primary Prevention Unit that were attended by Contractor's staff.	At least nine

**C. Impact Objectives**

Contractor shall provide services towards achieving the impact objective specified in the Exhibit A-SOW.

Contractor's work towards achieving the impact objective specified in the Exhibit A-SOW is expected to contribute towards the following countywide impact objectives for older adults as specified in the ACBH Strategic Plan for AOD Primary Prevention Services:

- i. By 2024, older adults will decrease binge alcohol use by 3% as measured by CHIS.
- ii. By 2024, older adults will decrease cannabis use in combination with prescription and/or other drugs by 3% as measured by pre/post-test.
- iii. By 2024, older adults will decrease prescription drug use in combination with alcohol and/or other drugs by 3% as measured by pre/post-test.

## **V. Reporting and Evaluation Requirements**

Contractor shall input programmatic data into the Department of Health Care Services (DHCS) data entry system, Primary Prevention Substance Use Disorder Data Service (PPSDS), on a weekly basis and shall enter all data for the prior month by no later than the fifth business day of the following month. Contractor shall designate at least two key staff to be trained on the data system and shall be responsible to train any new staff who will enter data on an ongoing basis. Data entry shall be done in a timely manner, be accurate, and represent what is being delivered per the Exhibit A-SOW.

Contractor shall complete an Annual Program Report on an ACBH-provided template that describes Contractor's progress and performance in achieving Contract Deliverables and Requirements, including the stated Process, Quality, and Impact objectives. Reports shall be labeled in accordance with the established naming convention and shall be uploaded to the ACBH Citrix ShareFile within 30 days from the end of the contract period.

## **VI. Additional Requirements**

No additional requirements.